

TRAVEL EXPENSE CLAIM

See Instructions and "Privacy
Statement On Reverse SidePage 1 of

STD 262 (REV 6/93) (DHS Electronic)

CLAIMANT'S NAME John C. Duncan			SSAN OR EMPLOYEE NUMBER*			DEPARTMENT Industrial Relations		
POSITION 400-102-9472-001			CB/D NUMBER			DIVISION OR BUREAU Director's Office		
RESIDENCE ADDRESS			HEADQUARTERS ADDRESS 455 Golden Gate Avenue, 10th Fl.			INDEX NUMBER		
CITY			STATE CA			ZIP CODE 94102		

(1) MONTH/YEAR		(3)	(4)	(5) MEALS		(6)	(7) TRANSPORTATION				(8)	(9)			
5	2010			LOCATION WHERE EXPENSES WERE INCURRED	LODGING		BREAK- FAST	LUNCH	O.T., L/T, N/C, RELO. OR DINNER	INCIDENTALS			(A) COST OF TRANS	(B) TYPE USED	(C) CARFARE TOLLS PARKING
(2) DATE	TIME											MILES	AMOUNT		
4	0700 1900	Tiburon to Sacramento; return							PC	P	12.00				
										T	4.00	184	92.00		108.00
10	0700 1900	Tiburon to Sacramento; return							PC	P	20.00				
										T	4.00	184	92.00		116.00
11	0700 1900	Tiburon to Sacramento; return							PC	P	20.00				
										T	4.00	184	92.00		116.00
12	0700 2000	Tiburon to Sacramento; return							PC	P	20.00				
										T	4.00	184	92.00		116.00
13	0700 1900	Tiburon to Sacramento; return							PC	P	12.00				
										T	4.00	184	92.00		108.00
17	0700 2130	Tiburon to Sacramento	95.38			17.85			PC	P	32.00				
										T	4.00	92	46.00		195.23
18	0630 1900	Sacramento to Tiburon							PC	P	10.00				
										T	4.00	92	46.00		60.00
20	0700 2000	Tiburon to Sacramento, to San Francisco							PC	P	41.00				
										T	4.00	178	89.00		134.00
24	0700 1900	Tiburon to Sacramento; return							PC	P	12.00				
										T	4.00	184	92.00		108.00
(10) SUBTOTALS			95.38			17.85					215.00	1466	733.00		1061.23
COLUMN CODE (ACCTG USE ONLY)															

(11) PURPOSE OF TRIP, REMARKS, AND DETAILS (Attach receipts/vouchers when required)

5/4: meetings in Sacramento; worked from Sacramento DIR office; 5/10-11: meetings in Sacramento; worked from DIR Sacramento office; 5/12: attended Senate Labor & Industrial Rel. committee hearing; worked from Sacramento DIR office; 5/13: meetings in Sacramento; worked from Sacramento DIR office; 5/17-18: meetings in Sacramento; worked from Sacramento DIR office; 5/20: attend Assembly Sub 4 hearing; attended State Compensation Insurance Fund Board of Director's meeting; 5/24: attended Senate Sub 5 Open Issues hearing; worked from Sacramento DIR office.

CALSTARS CODING

FY INDEX OBJ AG PCA #REF! PROJ-WP

(12) NORMAL WORK HOURS

(13) PRIVATE VEHICLE LICENSE NUMBER

(14) MILEAGE RATE CLAIMED

\$0.500

AGENCY ACCOUNTING OFFICE
USE ONLY

PAID BY REVOLVING FUND CHECK NO.

(15) I HEREBY CERTIFY That the above statement is a true statement of the travel expenses incurred by me in accordance with DPA rules in the service of the State of California. If a privately owned vehicle was used, and if mileage rates exceed minimum rate, I certify that the cost of operating the vehicle was equal to or greater than the rate claimed, and that I have requirements as prescribed by SAM Sections 0750, 0751, 0752, 0753, and 0754 pertaining to vehicle safety and seat belt

CLAIMANT'S SIGNATURE

DATE

(16) SIGNATURE, OFFICER APPROVING TRAVEL&PAYMENT

DATE

(17) SPECIAL EXPENSE AUTHORIZATION - SIGNATURE AND TITLE (See item 17 in instructions)

DATE